

## **Information for Second (or Subsequent) Marriage and Family Therapist Intern Registration Applicants**

NOTE: Business and Professions Code 4984.01 Marriage and Family Therapist Intern (IMF) Registration; Duration; Renewal

“A registration as a marriage and family therapist intern may be renewed a maximum of five times. When no further renewals are possible, an applicant may apply for and obtain a new marriage and family therapist intern registration if the applicant meets all requirements for registration in effect at the time of his or her application for a new marriage and family therapist intern registration. An applicant issued a subsequent intern registration pursuant to this subdivision may be employed or volunteer in any allowable work setting except private practice.”

Please utilize the information below to identify your situation and determine what steps you need to take in order to complete your application for a second IMF registration number. This information is provided as a guide. For questions please contact (916) 574-7830.

A. Scenario: Applicant has a cancelled IMF number but is currently in the MFT exam cycle. The following is required:

1. 2<sup>nd</sup> IMF Registration Number Application
2. 2x2 passport size photo
3. \$75.00 Application Fee

B. Scenario: Applicant has a current and valid IMF number that is due to expire or has been cancelled no longer than 30 days. The following is required:

1. 2<sup>nd</sup> IMF Registration Number Application
2. 2x2 passport size photo
3. \$75.00 Application Fee

C. Scenario: Applicant has a cancelled IMF number that has been cancelled over 30 days and is not in the exam cycle. The following is required:

1. 2<sup>nd</sup> IMF Registration Number Application
2. 2x2 passport size photo
3. Official Transcripts
4. Live Scan Fingerprints
5. \$75.00 Application Fee

## **FAQ's**

**1. Will I lose all my hours because they were gained under my first number if I apply for a second number?**

Not necessarily, but all hours of experience must be gained within the most recent six years from the time you apply for MFT examination eligibility. Hours older than six years from the time you apply for MFT examination eligibility will not count.

Example: Susan applies for MFT examination eligibility. The Board receives her application on 4/27/2012. All of the hours she gained (under all IMF numbers) between 4/27/2006 and 4/27/2012 will be acceptable.

**2. Can I work in a private practice setting under my second IMF registration number?**

An applicant issued a subsequent IMF number cannot work in a private practice setting. All other work settings are permissible. Statutes and Regulations cited: B&P Code Section 4984.01.

**3. My hours have been approved and I am in the exam cycle, do I need a current IMF number to continue testing?**

The IMF registration and examination process are two separate processes. Once your hours have been approved and you are in the exam cycle they are unrelated. You are only required to keep an active and current registration while gaining hours and/or if you are still working in a clinical setting.

# 2<sup>nd</sup> IMF REGISTRATION NUMBER

STATE OF CALIFORNIA – BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY

Governor Edmund G. Brown Jr.



**Board of Behavioral Sciences**  
1625 North Market Blvd., Suite S200, Sacramento, CA 95834  
Telephone: (916) 574-7830 TDD: (800) 326-2297  
www.bbs.ca.gov



## APPLICATION FOR REGISTRATION AS A MARRIAGE AND FAMILY THERAPIST INTERN

### APPROPRIATE FEE MUST ACCOMPANY THIS FORM

Make check payable to Behavioral Sciences Fund

*For Office Use Only:*

Cashiering No.

(Please type or print clearly in ink)

1. Legal name*: Last		First		Middle	
Maiden name and any other AKA					
2. Address of Record**: Number and Street					
City		State		Zip Code	
3. Business Telephone:		4. Residence telephone:			
5. E-Mail Address:					
6. Birth Date: mm/dd/yyyy		7. Social Security Number***:		8. Sex:	
9. Education: (Qualifying Degree)		10. Name of school, college or university:			

ATTACH A  
PHOTOGRAPH TAKEN  
WITHIN 60 DAYS  
OF THE FILING  
OF THIS APPLICATION  
(Head and Shoulders Only)

11. Have you ever been convicted of, pled guilty to, or pled nolo contendere to any misdemeanor or felony?  
(Convictions dismissed under Section 1203.4 of the Penal Code must be disclosed. You need not include offenses prior to your 18th birthday or any traffic violations for which a fine of \$500.00 or less was imposed.) Yes ☐ No ☐

If YES, attach your explanation and related documents as described in the reporting prior conviction(s) section of the instructions. You must disclose all convictions even if previously reported to the Board. However, it is not necessary for you to re-submit documentation previously on file; you may simply provide a written statement indicating that you believe the information is already on file.

12. Have you ever been denied a professional license, had a professional license privilege suspended, revoked, or otherwise disciplined, or have you ever voluntarily surrendered any such license in California or any other state or territory of the United States, or by any other governmental agency? Yes ☐ No ☐

If YES, attach your explanation and related documents as described in the reporting discipline against license(s) section of the instructions.

***I declare under penalty of perjury under the laws of the State of California that all the information submitted on this form and on any accompanying attachments is true and correct.***

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

\*Business and Professions Code section 4982(b) gives the board the right to refuse to issue any registration or license, or may suspend or revoke the license or registration of any registrant or licensee if the applicant secures the license or registration by fraud, deceit, or misrepresentation on any application for licensure or registration submitted to the board.

\*\* The address you enter on this application is public information and will be placed on the Internet pursuant to Business and Professions Code section 27. If you do not want your home or work address available to the public, please provide an alternate mailing address.

\*\*\* Disclosure of your social security number is mandatory. Section 30 of the Business and Professions Code and Public Law 94-455 (42 USCA 405 (c) (2) (c)) authorizes collection of your social security number. Your social security number will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for family support in accordance with Section 17520 of the Family Code, or for verification of licensure or examination status by a licensing or examination entity which utilizes a national examination and where licensure is reciprocal with the requesting state. If you fail to disclose your social security number, your application for registration will not be processed AND you will be reported to the Franchise Tax Board, which may assess a \$100 penalty against you.